

Application Type New  
Wastewater Type Sewage  
Facility Type SRSTP

## NPDES PERMIT FACT SHEET INDIVIDUAL SFTF/SRSTP

Application No. PA0245704  
APS ID 1120633  
Authorization ID 1497242

### Applicant, Facility and Project Information

Applicant Name <u>John &amp; Caroline Dimascio</u>	Facility Name <u>27 Sylvan Dr SRSTP</u>
Applicant Address <u>27 Sylvan Drive</u> <u>Pottstown, PA 19465-8321</u>	Facility Address <u>27 Sylvan Drive</u> <u>Pottstown, PA 19465-8321</u>
Applicant Contact <u>John Dimascio</u>	Facility Contact <u>John Dimascio</u>
Applicant Phone <u>610-781-6931</u>	Facility Phone <u>610-781-6931</u>
Client ID <u>387894</u>	Site ID <u>863130</u>
SIC Code <u>8811</u>	Municipality <u>East Coventry Township</u>
SIC Description <u>Services - Private Households</u>	County <u>Chester</u>
Date Application Received <u>August 8, 2024</u>	WQM Required <u>Yes</u>
Date Application Accepted <u>August 30, 2024</u>	WQM App. No. <u>1524409</u>
Project Description <u>New SRSTP w/ UV disinfection discharging to HQ-TSF, MF designated stream.</u>	

### Summary of Review

The PA Department of Environmental Protection (PADEP/Department) received a NPDES and WQM Part II applications for a new National Pollutant Discharge Elimination System (NDPES) Individual Permit. The application is to discharge 500 gallons per day (gpd) of treated sewage from DiMascio single residence sewage treatment plant (SRSTP) to an Unnamed Tributary of Pigeon Creek a designated High Quality – Trout Stocking Fishes (HQ – TSF) under chapter 93 in watershed 3-D. The proposed facility is located at 27 Sylvan Dr, Pottstown, PA 19465.

This facility is designed to serve the existing 4-bedroom single-family residence (500 gpd). The Act 537 plan was approved by PA DEP on February 14, 2023 under DEP Code 1-15917-268-3s. The proposed treatment process will replace a malfunctioning on-lot system, according to the Act 537 plan approval. The proposed sewage treatment plant consists of 1,250-gallon dual compartment septic tank w/ effluent filter preceding the AdvanTex unit. The AX-20 RTUV unit is a recirculating filter system equipped with a recirculating pump and UV disinfection.

The proposed effluent limits of Outfall 001 are based on a permitted discharge flow of 500 gpd are as follows:

Parameters	Concentration (mg/l)	
	Average Monthly	Instantaneous Maximum
Flow	Report	
BOD <sub>5</sub>	10	20
Total Suspended Solids (TSS)	10	20
Fecal Coliform (No./100ml)	200 Geometric Mean	
pH	6 – 9 S.U.	

The effluent limitations and monitoring requirements are derived from the Department's Standard Operating Procedure (SOP) for New and Reissuance Small Flow Treatment Facility Individual NPDES Permit Applications (SOP No. BPNPSM-PMT-003).

Approve	Deny	Signatures	Date
X		<i>Christian French</i> Christian French / Environmental Engineering Specialist	September 9, 2024
X		<i>Pravin Patel</i> Pravin C. Patel, P.E. / Environmental Engineer Manager	09/10/2024

### Summary of Review

TRC limits are not applicable for this facility since the facility will utilize UV disinfection. Per the SOP, it is not necessary to require UV intensity or transmittance monitoring in the permit for SRSTP with UV system.

No Water Quality Modeling was conducted per SOP BPNPSM-PMT-003.

Act 14 Notifications were sent to Chester County and East Coventry Township on June 26, 2024.

#### I. Other Requirements

- A. AMR to DEP
- B. DMR to DEP if Attached
- C. 1/year Measure Depth of Septage and Scum
- D. Septic Tanks Pumped Out Every Three Years
- E. No Stormwater
- F. Necessary Property Rights
- G. Proper Sludge Disposal
- H. Abandon STP when Municipal Sewers Available

#### Public Participation

DEP will publish notice of the receipt of the NPDES permit application and a tentative decision to issue the individual NPDES permit in the *Pennsylvania Bulletin* in accordance with 25 Pa. Code § 92a.82. Upon publication in the *Pennsylvania Bulletin*, DEP will accept written comments from interested persons for a 30-day period (which may be extended for one additional 15-day period at DEP's discretion), which will be considered in making a final decision on the application. Any person may request or petition for a public hearing with respect to the application. A public hearing may be held if DEP determines that there is significant public interest in holding a hearing. If a hearing is held, notice of the hearing will be published in the *Pennsylvania Bulletin* at least 30 days prior to the hearing and in at least one newspaper of general circulation within the geographical area of the discharge.

Discharge and Stream Data – 2 - Receiving Waters and PWS

Discharge, Receiving Waters and Water Supply Information			
Outfall No.	001	Design Flow (MGD)	.0005
Latitude	40° 10' 56.63"	Longitude	-75° 37' 20.69"
Quad Name		Quad Code	
Wastewater Description: Sewage Effluent			
Receiving Waters	Unnamed Tributary to Pigeon Creek (HQ-TSF, MF)	Stream Code	01519
NHD Com ID	25989402	RMI	0.5700
Drainage Area	0.22 sq. miles	Yield (cfs/mi²)	0.026
Q <sub>7-10</sub> Flow (cfs)	0.0058 cfs	Q <sub>7-10</sub> Basis	PA StreamStats
Elevation (ft)	280.0	Slope (ft/ft)	3.3
Watershed No.	3-D	Chapter 93 Class.	HQ-TSF, MF
Existing Use	None	Existing Use Qualifier	N/A
Exceptions to Use	None	Exceptions to Criteria	N/A
Assessment Status	Attaining Use(s)		
Cause(s) of Impairment			
Source(s) of Impairment			
TMDL Status	None proposed	Name	N/A
Nearest Downstream Public Water Supply Intake		None	

Changes Since Last Permit Issuance: New Permit

**Proposed Effluent Limitations and Monitoring Requirements**

The limitations and monitoring requirements specified below are proposed for the draft permit, and reflect the most stringent limitations amongst technology, water quality and BPJ. Instantaneous Maximum (IMAX) limits are determined using multipliers of 2 (conventional pollutants) or 2.5 (toxic pollutants). Sample frequencies and types are derived from the "NPDES Permit Writer's Manual" (362-0400-001), SOPs and/or BPJ.

**Outfall 001, Effective Period: Permit Effective Date through Permit Expiration Date.**

Parameter	Effluent Limitations						Monitoring Requirements	
	Mass Units (lbs/day) <sup>(1)</sup>		Concentrations (mg/L)				Minimum <sup>(2)</sup> Measurement Frequency	Required Sample Type
	Average Monthly	Average Weekly	Minimum	Annual Average	Maximum	Instant. Maximum		
Flow (MGD)	Report Daily Min	XXX	XXX	XXX	XXX	XXX	1/year	Estimate
pH (S.U.)	XXX	XXX	6.0 Inst Min	XXX	XXX	9.0	1/year	Grab
BOD5	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
TSS	XXX	XXX	XXX	10.0	XXX	20	1/year	Grab
Fecal Coliform (No./100 ml)	XXX	XXX	XXX	200	XXX	1000	1/year	Grab